

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM TO-876)

SERIAL NO.
08-307621

FILING DATE

APPLICANT(S)

CLAIMS

| AS FILED | AFTER | | AFTER | | IND. | DEP. |
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| | 1st AMENDMENT | 2nd AMENDMENT | 1st AMENDMENT | 2nd AMENDMENT | | |
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| TOTAL CLAIMS | 8 | | | | | |

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS

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